

I-765

INSTRUCTIONS FOR COMPLETING SOME PARTS OF FORM I-765

NOTE: This set of instructions is designed especially **for F-1 students**. You may fill out this form on-line and then print out a final copy to sign. J-2 dependents may consult the handout entitled, “J-2 Work Authorization” for detailed instructions on completing the I-765.

#10. **Alien Registration Number (A-Number) or I-94 Number.** Record your I-94 card number. The I-94 number is the 11-digit number located in the upper left corner of your I-94 card. This is the small white card issued to you when you entered the U.S., and it probably is stapled into your passport. Most F-1 students will *not* have an A-Number.

#11. **Have you ever applied for employment authorization from Immigration?**

Answer “Yes” to this question if you have ever applied to Immigration for an Employment Authorization Document (EAD or work permit) to engage in Optional Practical Training, employment under the sponsorship of a qualified International Organization, or Off-Campus Economic Hardship employment. If you ever were a J-2 dependent with a work permit, you also would answer “yes.”

Answer “No” if you have never worked in the U.S. or if you have worked off campus under the terms of Curricular Practical Training (CPT). You also will answer “No” if you have worked only on-campus or if you previously have held a visa status that automatically granted you permission to work, such as an H-1B or a J-1 scholar. Ask an International Student Advisor if you are uncertain about how to complete this section.

#12. **Date of Last Entry into the U.S.** Enter the date of your MOST RECENT entry into the U.S. Check your I-94 card for the exact date. If the most recent entry is from Canada or Mexico and your I-94 card was not reissued, then check the passport for a date stamp.

#13. **Place of Last Entry into the U.S.** Provide the name of the city and state in the U.S. where you MOST RECENTLY arrived. Again, check your I-94 card if you can’t remember. The city code should appear near the date.

#14. **Manner of Last Entry.** If you entered the U.S. as an F-1 student, then write “F-1 Student.” If you entered in a different visa category, then consult with an International Student Advisor to be sure.

#15. **Current Immigration Status.** Write “F-1 student.”

#16. **Eligibility under 8 CFR 274a.12:**

If you are applying for Optional Practical Training, write: **(c) (3) (i);**

If you are applying for Employment under the sponsorship of a Qualifying International Organization, write: **(c) (3) (ii);**

If you are applying for Off-Campus Employment due to Severe Economic Hardship, write: **(c) (3) (iii).**

Certification: Don’t forget to sign, print your home telephone number, and record the date on the I-765.

Application for Employment Authorization

Do Not Write in This Block.

Remarks	Action Stamp	Fee Stamp
A#		
Applicant is filing under §274a.12 _____		
<input type="checkbox"/> Application Approved. Employment Authorized / Extended (<i>Circle One</i>) _____ until _____ (Date). Subject to the following conditions: _____ (Date). <input type="checkbox"/> Application Denied. <input type="checkbox"/> Failed to establish eligibility under 8 CFR 274a.12 (a) or (c). <input type="checkbox"/> Failed to establish economic necessity as required in 8 CFR 274a.12(c)(14), (18) and 8 CFR 214.2(f)		

I am applying for: ☐ Permission to accept employment.
☐ Replacement (*of lost employment authorization document*).
☐ Renewal of my permission to accept employment (*attach previous employment authorization document*).

1. Name (Family Name in CAPS) (First) _____ (Middle) _____	11. Have you ever before applied for employment authorization from INS? <input type="checkbox"/> Yes (If yes, complete below) <input type="checkbox"/> No
2. Other Names Used (Include Maiden Name) _____	Which INS Office? _____ Date(s) _____
3. Address in the United States (Number and Street) _____ (Apt. Number) _____ (Town or City) _____ (State/Country) _____ (ZIP Code) _____	Results (Granted or Denied - attach all documentation) _____
4. Country of Citizenship/Nationality _____	12. Date of Last Entry into the U.S. (Month/Day/Year) _____
5. Place of Birth (Town or City) _____ (State/Province) _____ (Country) _____	13. Place of Last Entry into the U.S. _____
6. Date of Birth _____ 7. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	14. Manner of Last Entry (Visitor, Student, etc.) _____
8. Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced	15. Current Immigration Status (Visitor, Student, etc.) _____
9. Social Security Number (Include all Numbers you have ever used) (if any) _____	16. Go to Part 2 of the Instructions, Eligibility Categories. In the space below, place the letter and number of the category you selected from the instructions (For example, (a)(8), (c)(17)(iii), etc.). Eligibility under 8 CFR 274a.12 () () ()
10. Alien Registration Number (A-Number) or I-94 Number (if any) _____	

Certification.

Your Certification: I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information which the Immigration and Naturalization Service needs to determine eligibility for the benefit I am seeking. I have read the Instructions in Part 2 and have identified the appropriate eligibility category in Block 16.

Signature _____ Telephone Number _____ Date _____

Signature of Person Preparing Form, If Other Than Above: I declare that this document was prepared by me at the request of the applicant and is based on all information of which I have any knowledge.

Print Name _____ Address _____ Signature _____ Date _____

Initial Receipt	Resubmitted	Relocated		Completed		
		Rec'd	Sent	Approved	Denied	Returned